

**NONPROVISIONAL PATENT APPLICATION**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

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Attorney Docket No.: 108057

Date: December 5, 2000

**BOX PATENT APPLICATION**

**NONPROVISIONAL APPLICATION TRANSMITTAL  
RULE §1.53(b)**

Director of the U.S. Patent and Trademark Office  
Washington, D.C. 20231

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional patent application

For (Title): MASK, EXPOSURE METHOD, LINE WIDTH MEASURING METHOD, AND METHOD FOR MANUFACTURING SEMICONDUCTOR DEVICES

By (Inventor): Kiyoichi SUWA

- ☒ Formal drawings (Figs. 1a-19b; 16 sheets) are attached.
- ☐ A Declaration and Power of Attorney is filed herewith.
- ☐ An assignment of the invention to NIKON CORPORATION is filed herewith.
- ☐ An Information Disclosure Statement is filed herewith.
- ☐ Entitlement to small entity status is hereby asserted.
- ☐ A Preliminary Amendment is filed herewith.
- ☐ Please amend the specification by inserting before the first line the sentence --This nonprovisional application claims the benefit of U.S. Provisional Application No. \_\_\_\_\_, filed \_\_\_\_\_.--
- ☒ Priority of foreign application No. 11-348196 filed December 7, 1999 in Japan is claimed (35 U.S.C. § 119).
- ☐ A certified copy of the above corresponding foreign application is filed herewith.
- ☒ The filing fee is calculated below:

**CLAIMS IN THE APPLICATION AFTER ENTRY OF  
ANY PRELIMINARY AMENDMENT NOTED ABOVE**

FOR:	NO. FILED	NO. EXTRA
BASIC FEE		
TOTAL CLAIMS	14 - 20	= *
INDEP CLAIMS	2 - 3	= *
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS PRESENTED		

\* If the difference is less than zero, enter "0".

**SMALL ENTITY**

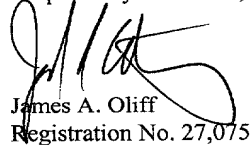
RATE	FEE
	\$ 355
x 9 =	\$
x 40 =	\$
+ 135 =	\$
<b>TOTAL</b>	<b>\$</b>

**OTHER THAN A  
SMALL ENTITY**

RATE	FEE
	\$ 710
x 18	\$
x 80	\$
+ 270	\$
<b>TOTAL</b>	<b>\$ 710</b>

- ☒ Check No. 114380 in the amount of \$710.00 to cover the filing fee is attached. Except as otherwise noted herein, the Director is hereby authorized to charge any other fees that may be required to complete this filing, or to credit any overpayment, to Deposit Account No. 15-0461. Two duplicate copies of this sheet are attached.

Respectfully submitted,

  
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JAO:JSA/mgs